CLAIMS ONLY

Application Number	Filing Date
10/542779	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend								
1	1						51							
2		1					52							
3		2					53							
4		2					54							
5		2					55							
6		(1)					56							
7	1						57							
8		1					58							
9		2					59							
10		(1)					60							
11							61							
12							62							
13							63							
14							64							
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44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
Total Indep	2						Total Indep							
Total Depend	12						Total Depend							
Total Claims	14						Total Claims							